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CONFIRMATION NO. 9503

<b>SERIAL NUMBER</b> 10/527,140	<b>FILING OR 371(c) DATE</b> 10/19/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> SHIG CPTA1402US
<b>APPLICANTS</b> Toshiyuki Hayase, Sendai-shi, JAPAN; Kenichi Funamoto, Sendai-shi, JAPAN; Atsushi Shirai, Sendai-shi, JAPAN; Tomoyuki Yambe, Sendai-shi, JAPAN; Yoshifumi Saijo, Sendai-shi, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/12689 10/02/2003				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-293631 10/07/2002				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 2
		<b>INDEPENDENT CLAIMS</b> 1		
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<b>TITLE</b> Blood flow visualizing diagnostic apparatus				
<b>FILING FEE RECEIVED</b> 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	